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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: U-SAVE AUTO P	ARTS CORP	
DOCUMENT NUMB			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
1	PEDRO GUARINO		
-		Name of Contact Perso	n
1	U-SAVE AUTO PARTS CO	RP	
-		Firm/ Company	
	10022 NW 7TH STREET AI	T 205	
-	 	Address	
1	MIAMI / FLORIDA / 33172		
-	· ·	City/ State and Zip Cod	e
pedro.	g@usaveapc.com		
	<u> </u>	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
PEDRO GUARINO		at (³⁰⁵	833-5978
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address Indment Section It ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

U-SAVE AUTO PARTS CORP			10 E 1
(Name	of Corporation as current	ly filed with the Florida Dept. of	State C
P15000027414			
3,1	(Document Number of	of Corporation (if known)	**************************************
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopt	s the following amended
A. If amending name, enter the new n	ame of the corporation:		Dr.
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associated	nation "Corp," "Inc," or	"Co". A professional corporation	ed" or the abbreviation name must contain the
B. Enter new principal office address, if applicable:		10022 NW 7TH STREET APT	Γ 205
(Principal office address MUST BE A S	TREET ADDRESS)	MIAMI FL 33172	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10022 NW 7TH STREET AP	r 205
		MIAMI FL 33172	
D. If amending the registered agent ar	nd/or registered office add	ress in Florida, enter the name o	<u>f the</u>
new registered agent and/or the ne	w registered office addres	s:	
Name of New Registered Agent	PEDRO GUARINO		
	10022 NW 7TH STREET	APT 205	
	(Florida st	reet address)	
New Registered Office Address:	MIAMI	. Flo	33172 orida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.			the position
, , , , , , , , , , , , , , , , , , , ,		y	.
	Dayles	at labo	
	Signature of New 1	egistered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	PARES PADRON, MANUEL J	3900 NW 79TH AVE STE 324
Add X Remove			MIAMI FL 33166
2) Change	S	MEDINA, FILIBERTO A	3900 NW 79TH AVE STE 324
Add			MIAMI FL 33166
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<u></u>		
Remove			
6) Change			•
Add	-		
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an anger itself:

• • • • • • · · · · · · · · · · · · · ·	04/18/2016	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	//02/2017	
Effective date if applicable:	/02/2016	
,	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date we department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
• • • • • • • • • • • • • • • • • • •	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
05/02/201 Dated	.6	
Signature	Down toff Cello	
	director, president or other officer - if directors or officers have not been	
	ed, by ah incorporator – if in the hands of a receiver, trustee, or other court	
арро	nted fiduciary by that fiduciary)	
	PEDRO GUARINO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	